

BOOK REVIEW

Imperfect Pregnancies: A History of Birth Defects and Prenatal Diagnosis *by Ilana Lówy*

Hardback, 296 pages
Johns Hopkins University Press
September 2017

Imperfect Pregnancies traces the development of prenatal diagnosis from an interest in monstrous births, through a focus on maternal health, to its current widespread use. The reduction in maternal mortality achieved by the 1950s drew attention to the failure of infant mortality to keep pace. Initial foetal investigations relied heavily on amniocentesis, hazardous enough to mean testing was only offered to women already considered at risk. However, the development of non-invasive prenatal testing has made such screening potentially available to all pregnant women.

Yet *Imperfect Pregnancies* is far from being an account of scientific and technological development in isolation. The events it describes are firmly located in time: the influence of the juxtaposition of the thalidomide disaster, a rubella epidemic and the environmental concerns of *Silent Spring* is clearly brought out, but Ilana Lówy also draws out cultural influences. For example, in the Netherlands, where midwives who are professionally focused on pregnancy as a natural function rather than a medical problem provide the bulk of maternity care, there is low take-up of prenatal screening. By contrast, Israeli women and their attendants fear catastrophe in pregnancy, as in the history of their nation, and take-up of screening is high.

Many commentators see prenatal testing leading to a brave new eugenic world, but Lówy does not, feeling instead that the reality is anxious mothers faced with making major decisions while inadequately counselled, particularly when the problem may not manifest itself until adulthood, if at all. She argues that advocates of population screening are reluctant to acknowledge the burden that it can place upon the patient being screened. Parents need reassurance, and to have a good relationship with their child, but the stress of potential abnormality can reduce this.

This book is clearly the product of much scholarly research, which can occasionally result in losing focus in the detail; it would also have been enhanced by a fuller index. Perhaps a challenging study for the general reader, *Imperfect Pregnancies* will appeal to historians of medicine and should be required reading for all who support population screening. Above all, it is a rational, erudite, thoughtful – and thought-provoking – account of a major change in the experience of pregnancy which has come about largely unnoticed.

Alison Nuttall
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